

Melissa Guzman <me.guzman@casamd.org> on 01/08/2015 03:04:31 PM

To:

2022190174@fec.gov,

cc:

Subject: 24hr Report - Casa in Action

To whom it may concern,

Casa in Action's 24hr amended report is attached.

Thanks, Melissa

Melissa Guzman **Director of Finance** CASA de Maryland, Inc. 8151 15th Avenue, Langley Park, MD 20783 Direct: 301.270.3270 Fax: 301.270.8659 www.casademaryland.org



24hr Report.pdf

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To be osed by reisons (other than rollidal confinitees)	
(a) Name of Individual, Organization or Corporation	
Casa in Action, Inc.	
(b) Address (number and street)	
8151 15th Avenue	
(c) City, State and ZIP Code	
Hyattsville, MD 20783	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)	
	Table was also be the winds of a local
TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
☐ July 15 Quarterly Report	
October 15 Quarterly Report 48-Hour Report	
☐ January 31 Year-End Report	
□ January 31 fear-End Report	
b) Is this Report an amendment? No X Yes, it amends the report filed on 5. COVERING PERIOD: FROM	1 0 2 2 2 0 1 4
THROUGH	·
6. TOTAL CONTRIBUTIONS	1 0 0 0 0 0 0
7. TOTAL INDEPENDENT EXPENDITURES	5,6 92,62
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consul suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	tation, or concert with, or at the request or
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
Melissa Guzman, Director of Finance	1/8/15
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this repor	t to the penalties of 52 U.S.C. §30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A ITEMIZED RECEIPTS

PAGE 2 OF 9

			ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF FILER (In Full)			
Casa in Action			
A. Full Name (Last, First, Middle Initial)			
Center for Community Change	e Action		Date of Receipt
Mailing Address 1536 U Street, NW			10 30 2 0 14
City	State	Zip Code	
Washington	DC	20009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C:9 0	0 1 2 1 1 3	10,00000
Name of Employer		Occı	pation
B. Full Name (Last, First, Middle Initial)			
			Date of Receipt
Mailing Address			W - W - 7 70 18 7 1 4 1 4 1 4 1 4 1
City	State	Zip Code	
	····		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Ċ.	en e	The second secon
Name of Employer		Occu	pation
0 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u> </u>
C. Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			AN N I D D I TO TO TOTAL
City	State	Zip Code	Amount of Each Receipt this Perlod
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	С		7. 12 7 2 2 7 3 7
Name of Employer		Occu	pation
D. Full Name (Last, First, Middle Initial)			
D. For Name (Last, First, Middle miliar)			Date of Receipt
Mailing Address			N H / D D / T Y Y T
City	State	Zip Code	
	<u> </u>		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		•
Name of Employer		Occu	pation
SUBTOTAL of Receipts This Page (options			
SOBIOIAL of neceipts This Page (options	ai)		1 0,0 0 0 0 0
TOTAL This Period (last page carry total to	c Line 6)		1 0 0 0 0 0

CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURE	:S			PAGE 3 OF 9 FOR LINE 7 OF FORM 5
AME OF FILER (In Full)				
Casa in Action				
Full Name (Last, First, Middle Initial) of Payee				Date of Califfa Distribution/Discouriestics
				Date of Public Distribution/Dissemination
Baires, Elizabeth Mailing Address				10 17 2014
10404 Lucasville Road				Amount
City	State	Zip Code		,
Manasas		20112		157 63'
Purpose of Expenditure	VA		T 0ff	in Sought V House Class VA
Canvassing		Category/ Type	0,	ice Sought: X House State: VA Senate 5: 10
Name of Federal Candidate Supported or Opposi	ed by Expend	liture:	-	President District: 10
John Foust	00 b) =	muro.	Che	eck One: X Support Oppose
Calendar Year-To-Date Per Election		1 5 7 6 2	Dist	bursement For: Primary X General
for Office Sought	. r _	1 5 7 6 3		Other (specify)
Full Name (Last, First, Middle Initial) of Payee			'	Date of Public Distribution/Dissemination
Gutierrez, Wesley Mailing Address			<u> </u>	10 17 12074
7515 Buchanon Street #30				Amount
City	State	Zip Code		1 5 7 6 3
Hyattsville,	MD	20784		and the second s
Purpose of Expenditure		Category/	Offi	ice Sought: X House State: VA
Canvassing		Туре	<u>.</u>	Senate District: 10
Name of Federal Candidate Supported or Oppos	ed by Expend	liture:	Ch	eck One: Support Oppose
John Foust			+	
Calendar Year-To-Date Per Election for Office Sought	5.	3 1 5 2 6	Dist	bursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
Kohn, Isiah				1 0 1 7 12 0 14
Mailing Address				
11506 Love Joy Street				Amount
City Silver Spring	State MD	Zip Code 20902		, 1 5 7, 6, 3
Purpose of Expenditure Canvassing		Category/ •	Offic	ce Sought: X House State: VA Senate District: 10
Name of Federal Candidate Supported or Oppose	ed by Expend	liture:	1	President District:
John Foust			Che	eck One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	· •	4 7 2.8.9	Dist	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditu	ures		······ >	47289
(b) SUBTOTAL of Unitemized Independent Expendent	ditures		····· >	
(c) TOTAL Independent Expenditures(carry total from last page forward to Line		<u>:</u>	······ ▶	

TEMIZED INDEPENDENT EXPENDITURE	=0			PAGE 4 OF 9
NAME OF FILER (In Full)				FOR LINE 7 OF FORM 5
Casa in Action				
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
Sorto, Hada				'M & '
Mailing Address				10'17'20141
8644 Piney Branch Road, #201				Amount
City	State	Zip Code		1 5 7 6 3
Silver Spring	MD	20901		A CONTRACTOR OF THE
Purpose of Expenditure Canvassing		Category/ Type	Offic	ce Sought: X House State: VA
				Senate District: 10 President
Name of Federal Candidate Supported or Oppos	sea by Expend	oiture:	Che	ock One: X Support Oppose
John Foust		<u>-</u>		
Calendar Year-To-Date Per Election for Office Sought	,	630 52	DISC	oursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
Sandino, Varinia				10 17 2014
Mailing Address				10 1/ 2014 (
5014 37th Place				Amount
City	State	Zip Code		157_63
Hyattsville	MD	20782	1	
Purpose of Expenditure		Category/ Type	Offi	ce Sought: X House State: VA Senate
Canvassing Name of Federal Candidate Supported or Oppos	and by Evanor			Senate District: 10
John Foust	sed by Expend	andre.	Che	eck One: X Support Oppose
		Symple of the second	Dist	pursement For: Primary . General
Calendar Year-To-Date Per Election for Office Sought	7 .	78815		Other (specify)
Full Name (Last, First, Middle Initial) of Payee			L	
Hernandez, Helder				Date of Public Distribution/Dissemination
Mailing Address				i o ' i i i i i i i i i i i i i i i i i
2207 Chapman Road				Amount
City	State	Zip Code	-	15763,
Hyattsville	MD	20783		· · · · · · · · · · · · · · · · · · ·
Purpose of Expenditure	 	Category/	Offic	ce Sought: X House State: VA
Canvassing		Туре		Senate District: 10
Name of Federal Candidate Supported or Oppos	ed by Expend	diture:		President
John Foust			Che	ck One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought		9 4 5 7 8	Dist	oursement For: Primary X General
13. 0.1100 0003.11	*	1		Other (specify)
(a) SUBTOTAL of Itemized Independent Expendit	tures		📐	a garjana a la la la la garja la jara arawa. Tanggarjan
		,		4/28,9
(b) SUBTOTAL of Unitemized Independent Exper	nditures		🏲	
•			·	to the the the world of the test of the te
(c) TOTAL Independent Expenditures			···· >	
(carry total from last page forward to Lin	.o /)			

	CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES	;			PAGE 5 OF 9 FOR LINE 7 OF FORM 5
N,	AME OF FILER (In Full)				•
	Casa in Action				
	Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
	Ramos, Junior				
	Mailing Address				
	5646 Whitfield Chapel Road, #103				Amount
	City Lanham	State MD	Zip Code 20706		1 5 7 6 3
	Purpose of Expenditure		Category/	Offic	ce Sought: X House State: VA
	Canvassing		Туре		Senate District: 10
	Name of Federal Candidate Supported or Opposed	by Expend	liture:		President
	John Foust			Che	ck One: X Support Oppose
	Calendar Year-To-Date Per Election for Office Sought	ļ	1 1 0 3 4 1	Dist	oursement For: Primary X General Other (specify)
	Full Name (Last, First, Middle Initial) of Payee			<u> </u>	Date of Public Distribution/Dissemination
	Gutierrez, Jocelyn				14 8 7 15 67 7 3 7 7 7
	Mailing Address 6513 Lamont Drive				Amount 7 7 2 0 1 4
	City	State	Zip Code		15763
	New Carrolton	MD	20784		1 1 3 / 6 3 }
	Purpose of Expenditure Canvassing		Category/ Type	Offi	ce Sought: X House State: VA Senate District: 10
	Name of Federal Candidate Supported or Opposed	by Expend	liture:		President
	John Foust			Che	ack One: X Support Dppose
	Calendar Year-To-Date Per Election for Office Sought	}	1, 2,6,1,0,4,	Dist	oursement For: Primary X General Other (specify)
	Full Name (Last, First, Middle Initial) of Payee	-			Date of Public Distribution/Dissemination
	Carballo, Rogelio				10'17'2014
	Mailing Address				Same and Same and Same
	13570 Castlebridge Lane				Amount
	City Woodbridge	State VA	Zip Code 22193		1 5 7 6 3
	Purpose of Expenditure		Category/	Offic	ce Sought: X House State: VA
	Canvassing		Type •		Senate District: 10
	Name of Federal Candidate Supported or Opposed John Foust	I by Expend	lture:	Che	President ck One: X Support Oppose
	Calendar Year-To-Date Per Election for Office Sought	3	1,4 1 8 6 7	Dist	oursement For: Primary X General Other (specify)
	(a) SUBTOTAL of Itemized Independent Expenditure	as		····· >	47289
	(b) SUBTOTAL of Unitermized Independent Expendit	tures		···· >	and the second
	(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7			···· >	en e

MIZED INDEPENDENT EXPENDITUI	RES				PAGE 6	OF 9 7 OF FORM 5
ME OF FILER (In Full)						
Casa in Action						
Full Name (Last, First, Middle Initial) of Payee			D	ate of Put	olic Distribution	/Dissemination
Calvin, Trey				ֿאָר עָש ראַר די	, p ,	žðíď
Mailing Address				1 0	, 1 /	
27 R Street, NE			A	mount		
City	State	Zip Code		-	*	157,63
Washington	DC	20002	_[الأراب مسايره	1.3 / .0 3
Purpose of Expenditure		Category/	Office S	Sought:	X House	State: VA
Canvassing		Туре			Senate	District: 10
Name of Federal Candidate Supported or Opp	osed by Expen	diture:	1		President	
John Foust			Check	One:	Support	U Oppose
Calendar Year-To-Date Per Election for Office Sought	*	,157,63	Disburse	ement For	Primary	General
Full Name (Last, First, Middle Initial) of Payee				ate of Put	olic Distribution	/Dissemination
Aguilar, Luis Angel			-			
Mailing Address				1 0	1 7	2 0 1 4
6003 Bellview Drive		•	A	mount		
City	State	Zip Code			_	
Falls Church	VA	22041			2	5 3 5 5
Purpose of Expenditure		Category/	Office 8	Sought:	House	State: VA
Canvassing		Type		J	Senate	District: 10
Name of Federal Candidate Supported or Opp	osed by Expen	diture:	1		President	District:
John Foust			Check	One:	X Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	3	2,3 2 9 8 5	Disburs	ement For	Primary	X General
Full Name (Last, First, Middle Initial) of Payee		·	D	ate of Put	olic Distribution	/Dissemination
US Post Office				ų y	1 2 8 1	/ + v ′ - v - v
Mailing Address				1 0	2.8	2 0 1 4
900 Brentwood Road, NE			A	mount		
City	State	Zip Code				4 8 4 3 0
Washington	DC	20018			1	4 0 4 0 0
Purpose of Expenditure		Category/	Office S	Sought:	X House	State: VA
Postage for Mailer		Туре		-	Senate	District: 10
Name of Federal Candidate Supported or Opp	osed by Expen	diture:	1		President	District.
John Foust			Check (One:	X Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	 †	2 8 1 4 1 5	Disburs	ement For	— ′	X General
B) SUBTOTAL of Itemized Independent Expen	ditures				· · · · · · · · · · · · · · · · · · ·	9 5 4 8
				•	in Tari	•
b) SUBTOTAL of Unitermized Independent Exp	enditures			,		• , .
c) TOTAL Independent Expenditures(carry total from last page forward to l			····· >	7	, , , , , , , , , , , , , , , , , , ,	_{

	CHEDULE 5-E EMIZED INDEPENDENT EXPENDITURES	;				PAGE 7	OF 9 7 OF FORM 5
N/	AME OF FILER (In Full)					I	
	Casa in Action						
_	Full Name (Last, First, Middle Initial) of Payee				Date of Pu	ublic Distribution	Dissemination
	Peake, Delancy			ļ	- 1 7	16.01	2 0 1 4
	Mailing Address					2.0	2,0 1,4
	2500 Schuster Drive	·			Amount		
	City	State	Zip Code				0120
	Hyattsville	MD_	20781		. +		
	Purpose of Expenditure Printing		Category/ Type	Office	Sought:	X House Senate	State: VA
	Name of Federal Candidate Supported or Opposed	d by Expend	iture:			President	District: 10
	John Foust	гоу широпа		Chec	k One:	X Support	Oppose
	Calendar Year-To-Date Per Election		2 4 1 5 2 5	Disbu	rsement Fo	or: Primary	X General
	for Office Sought	,	3,41535		Other	(specify)	
	Full Name (Last, First, Middle Initial) of Payee				Date of Pu	ublic Distribution	'Dissemination
	Galan, Yaheiry				4.8	″ _የ ጋ ገልግኘ <u>ዜ</u> ታሪ	15 6 1 7
	Mailing Address				, 1 0		2014
	8151 15th Avenue				Amount		
	City	State	Zip Code		•	ادی کا اندیادیایا این	8 6 8 2
	Hyattsville	MD ———	20783		· <u>-</u> · .	ell' =	
	Purpose of Expenditure		Category/ Type	Office	Sought:	X House Senate	State: VA
	Management Name of Federal Candidate Supported or Opposed	d by Evpand		}		President	District: 10
	John Foust	a by Expend	illoro.	Chec	k One:	X Support	Oppose
		<u>-</u>	<u>-</u> .	Disbu	rsement Fo	or: Primary	X General
	Calendar Year-To-Date Per Election for Office Sought	2 .	4 1 0 2 1 7			(specify)	ث
	Full Name (Last, First, Middle Initial) of Payee					ublic Distribution	/Dissemination
	Vladar, Mate						2 0 1 4
	Mailing Address				1 (, 20	2014
	8151 15th Avenue				Amount		
	City	State	Zip Code			• •	19995
	Hyattsville	MD	20783				
	Purpose of Expenditure Design		Category/ Type	Office	Sought:	X House	State: VA
	Name of Federal Candidate Supported or Opposed	d by Evnend	1	-		Senate President	District:
	John Foust	J by Expend	maro.	Chec	k One:	X Support	Oppose
				Disbu	rsement Fo	or: Primary	X General
	Calendar Year-To-Date Per Election for Office Sought	1	4,302.12			(specify) ▶	
	(a) SUBTOTAL of Itemized Independent Expenditur	rae				عجم درعونيت د	,
	ta, Cobrotat of Remized independent Expenditor	· · · · · · · · · · · · · · · · · · ·		····· >	.**	r -174.	8 7 9 7
	(b) SUBTOTAL of Unitemized Independent Expendi	itures		🍆	•	e ≜er ses	
	·			-	,	n www.and	: • • • • • • • • • • • • • • • • • • •
	(c) TOTAL Independent Expenditures			▶ .	.*	e e e e e e	-

SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURE:	s		PAGE 8 OF 9 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)			FOR LINE 7 OF FORM 5
Casa in Action			,
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Carballo, Lindolfo			10 17 2014
Mailing Address			10 .17 2014;
901 South Highland Street, 3rd Floor	•		Amount
City Arlington	State VA	Zip Code 22204	5 9 6 1 6
Purpose of Expenditure		Category/	Office Sought: X House State:
Canvassing		Туре	Senate District:
Name of Federal Candidate Supported or Oppose	d by Expend	diture:	☐ President
John Foust			Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	,	4,89828	Disbursement For: Primary X General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Zelaya, Eduardo			10/17/2014
Malling Address			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
901 South Highland Street, 3rd Flo	or		Amount
City Arlington	State VA	Zip Code 22204	3 0 3 5 9
Purpose of Expenditure		Category/	Office Sought: X House State: VA
Canvassing		Type ·	Senate District: 10
Name of Federal Candidate Supported or Oppose	ed by Expend	diture:	Check One: X Support Oppose
John Foust			
Calendar Year-To-Date Per Election for Office Sought	,	5.2 0 1.5 7	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee			Date of Public Distribution/Dissemination
Contreras, Wendy			10'17'2014
Mailing Address			and the second
901 South Highland Street, 3rd Floor			Amount
City Arlington	State VA	Zip Code 22204	, , 3 0 3 5 9
Purpose of Expenditure Canvassing	•	Category/ Type	Office Sought: X House State: VA Senate District: 10
Name of Federal Candidate Supported or Oppose John Foust	d by Expend	diture:	President Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	4	5 5 0 5 4 6	Disbursement For: Primary X General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditu (b) SUBTOTAL of Unitemized Independent Expendent	litures		
(c) TOTAL Independent Expenditures(carry total from last page forward to Line			····• >

SCHEDULE 3-E ITEMIZED INDEPENDENT EXPENDIT	URES			PAGE 9 OF 9 FOR LINE 7 OF FORM 5
NAME OF FILER (In Full)	<u> </u>			TON LINE TOF FORW 5
Casa in Action				
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of	Public Distribution/Dissemination
Skype			ň	4 + 0 +0 1 Y Y Y Y T
Mailing Address			1	0 211 2 014
3210 Porter Drive			Amount	
City	State	Zip Code	:	3716
Palo Alto	CA	94304	1	o material main in his faction in
Purpose of Expenditure		Category/	Office Sought:	X House State: VA
Communication		Туре		Senate District: 10
Name of Federal Candidate Supported or (Opposed by Expend	liture:		President
John Foust			Check One:	X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	***	3, 7, 1, 6	Disbursement Othe	For: Primary X General er (specify)
Full Name (Last, First, Middle Initial) of Pay	/ee		Date of	Public Distribution/Dissemination
NGP Van			/ IC-	- C C C C C C C C.
Mailing Address			ı	2 1 2 0 1 4
1101 15th Street, NW			Amount	
City	State	Zip Code		1.50.00
Washington	DC	20005		150000
Purpose of Expenditure		Category/	Office Sought	: X House State: VA
Phone bank		Туре		Senate District: 10
Name of Federal Candidate Supported or	Opposed by Expend	liture:	1	President
John Foust			Check One:	X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	. 7	15000	Disbursement Othe	For: Primary X General er (specify)
Full Name (Last, First, Middle Initial) of Page	/ee		Date of	Public Distribution/Dissemination
		•	u.	be a partition of the state of
Mailing Address		······································	•	
		٠	Amount	
City	State	Zip Code		· · · · · · · · · · · · · · · · · · ·
		· • · · · · · · · · · · · · · · · · · ·		la de la composición de la composición La composición de la
Purpose of Expenditure	•	Category/	Office Sought:	House State:
	· · · · · · · · · · · · · · · · · · ·	Туре		Senate District:
Name of Federal Candidate Supported or (Opposed by Expend	liture:	Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought	,		Disbursement	For: Primary General or (specify)
(a) SUBTOTAL of Itemized Independent Ex	penditures		<u> </u>	, , 1 8 7 . 1 . 6
(b) SUBTOTAL of Unitemized Independent	Expenditures		····· >	$\frac{\partial u}{\partial x} = \frac{1}{2} \left(\frac{\partial u}{\partial x} + \frac{\partial u}{\partial x} + \frac{\partial u}{\partial x} - \frac{\partial u}{\partial x} \right) = \frac{\partial u}{\partial x}$
(c) TOTAL Independent Expenditures(carry total from last page forward			······ •	5,692.62

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

The FEC added this page to the end of this filing	to indicate how it was received.
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
N	lext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify): EMail	Date of Receipt or Postmarked
∫ β PREPARER (8/2013)	1/8/2015 DATE PREPARED